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Fee payment:

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CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8

Thereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, with sufficient postage, in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22310-1450, on the below date:

on the below date:
Date: 15, 206 Name: Vincent J. Gnoffo, Reg. No. 44,714 Signature:

BRINKS HOFER GILSON &LIONE

Appln. No.: 10/822,437 Filed: April 12, 2004 April 12, 2004 Art Unit: 3766 Art Unit: 3766	In re Appl	n. of: Alan Y.	Chow of	et al.								
Fgr: MECHANICALLY ACTIVATED OBJECTS FOR TREATMENT OF DEGENERATIVE RETINAL DISEASE Attorney Docket No: 3614/204 Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450 TRANSMITTAL Sir: Attached is/are: Transmittal Letter; Request for Withdrawal as Attorney or Agent and Change of Correspondence Address a Return Receipt Postcard Fee calculation: No additional fee is required. Small Entity. An extension fee in an amount of \$month extension of time under 37 C.F.R. § 1.136(a). A petition or processing fee in an amount of \$ under 37 C.F.R. § 1.17(). An additional filing fee has been calculated as shown below: Small Entity Not a Small Entity Claims Remaining After Amendment Highest No. Previously Paid For Extra Rate Add'l Fee Or Rate Add'l Fee	Appln. No	o.: 10/822,	437					Examiner: Oropeza, Frances				
FOR TREATMENT OF DEGENERATIVE RETINAL DISEASE Attorney Docket No: 3614/204 Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450 TRANSMITTAL Sir: Attached is/are: Transmittal Letter; Request for Withdrawal as Attorney or Agent and Change of Correspondence Address at Return Receipt Postcard Fee calculation: No additional fee is required. Small Entity. An extension fee in an amount of \$ for amonth extension of time under 37 C.F.R. § 1.136(a). A petition or processing fee in an amount of \$ under 37 C.F.R. § 1.17(). An additional filling fee has been calculated as shown below: Small Entity	Filed:	April 12	, 2004					Art Unit: 3766				
Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450 Sir: Attached is/are: Transmittal Letter; Request for Withdrawal as Attorney or Agent and Change of Correspondence Address a Return Receipt Postcard Fee calculation: No additional fee is required. Small Entity. An extension fee in an amount of \$month extension of time under 37 C.F.R. § 1.136(a). A petition or processing fee in an amount of \$ under 37 C.F.R. § 1.17(). An additional filling fee has been calculated as shown below: Small Entity	For:	FOR T	REAT	MENT OF DEGI								
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An additional filing fee has been calculated as shown below: Small Entity	☐ An	extension fee in ar	n amour	nt of \$ for a _	mon	th ex	ctension	of time und	der 3	7 C.F.R.	§ 1.136(a).	
Claims Remaining After Amendment Previously Paid For Extra Rate Add'l Fee or Rate Add'l Fee	□ A p	etition or processi	ng fee ir	n an amount of \$	under	37 C	C.F.R. §	1.17(_).			
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Date 25, 2006

Minus

is enclosed.

Payment by credit card in the amount of \$_____ (Form PTO-2038 is attached).

Please charge Deposit Account No. 23-1925 in the amount of \$

First Presentation of Multiple Dep. Claim

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Account No. 23-1925.

A check in the amount of \$_____

Respectfully submitted,

The Director is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16

and any patent application processing fees under 37 CFR § 1.17 associated with this paper (including any extension fee required to ensure that this paper is timely filed), or to credit any overpayment, to Deposit

x 100=

+\$180=

Total

\$

Vincent J. Gnoffo (Reg/No. 44,714

x \$200=

+ \$360=

. A copy of this Transmittal is enclosed

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PTO/SB/83(09-04)
Approved for use through 11/30/2005. OMB 0651-0035
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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/822,437
Filing Date	April 12, 2004
First Named Inventor	Alan Y. Chow et al.
Art Unit	3766
Examiner Name	Oropeza, Frances P.
Attorney Docket Number	3614-204

To: Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450										
Please withdraw me as attorney for the above identified application, and										
⊠ all t	all the attorneys/agents of record.									
☐ the	the attorneys/agents (with registration numbers) listed on the attached paper(s), or									
NO	the attorneys/agents associated with Customer Number NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.									
The reasons	The reasons for this request are:									
Applicant/Client instructed us to transfer all files to Christopher P. Moreno at the Vedder Price et al. law firm. Applicant is aware that we are filing this request.										
CHANGE OF CORRESPONDENCE ADDRESS										
1. The correspondence address is NOT affected by this withdrawal.										
2. Change the correspondence address and direct all future correspondence to: Christopher P. Moreno										
The address associated with Customer Number:										
OR										
Individual Name 222 North LaSalle Street										
Address			04-4-	S4-4- III			Zip	60601		
City		Chicago State IL				Zip	00001			
Country United States										
Telephone (312) 609-7500 Fax (312) 609-5005										
Signature Vicent Dollar										
Name	Vincent J. C	anoffo V U		Registration No.		44,714				
Date	Jan.	25,2006	No.				(312) 321-4200			
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.										

This collection of information is required by 37CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Inforamtion Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.